

# CLS Health & Safety Program

## New and Young Employee Orientation Checklist

### Location

Employee's Name and Position

Date of Orientation

Supervisor's Name

Employee has been provided with contact number and/or email address of Supervisor.

Employee has received a CLS Joint Occupational Health & Safety Committee business card listing members and their contact numbers.

If **any** of the following applies, complete and document a workplace orientation. Worker is:

- **A new worker under 25 years old**
- **New to the workplace**
- **Returning to a workplace where hazards have changed during their absence**
- **Affected by a change in the hazards of the workplace**
- **Relocated to a new workplace with different hazards from the previous workplace.**

### Employer Responsibilities

Your employer has the responsibility to

- Ensure employees health and safety
- Establish an occupational health and safety program (OHS Regulation 3.3)
- Inform employees of the hazards in their workplace
- Ensure that you are properly trained, educated and supervised to protect your health and safety
- Inspect the workplace to correct unsafe conditions
- Provide and maintain equipment and personal protective equipment
- Consult with the joint health and safety committee or employee health and safety representative and respond to their recommendations
- Provide first aid should you be injured
- Investigate reports of injury and disease, near-misses, and complaints of unsafe conditions

### Employee Rights

You have the right to

- A safe work environment
- Health and safety information, instruction, and training
- Know the hazards to which you are likely to be exposed
- Equipment, including personal protective equipment (PPE)
- Be represented by and participate in health and safety activities
- Refuse unsafe work
- Not be discriminated against (i.e. fired or disciplined) for exercising any right or carrying out a health and safety responsibility (i.e. refusal of unsafe work, reporting a hazard or injury, or filing a claim)
- Report an occupational injury or illness to WorkSafeBC via Teleclaim (1.888.967.5377) or dial #5377 on your Telus, Bell or Rogers Mobility (toll free) and press 2.

### Employee Responsibilities

You have the responsibility to:

- Follow safe work procedures and safety rules
- Use protective clothing, devices, and equipment appropriately
- Report hazards and unsafe situations to your supervisor
  - In person
  - By phone or email
  - With a CLS Health and Safety Program Employee Incident Report

# CLS Health & Safety Program

## New and Young Employee Orientation Checklist

### Employee Responsibilities continued

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| <ul style="list-style-type: none"> <li><input type="checkbox"/> Refuse any task you believe poses undue risk of injury or disease             <ul style="list-style-type: none"> <li>• Immediately report the situation to your supervisor (you might be assigned to other work)</li> <li>• If you feel the work continues to be unsafe, contact your employee safety representative to investigate</li> <li>• If you feel the work still continues to be unsafe and you have not been assigned to other work, contact WorkSafeBC for a determination</li> </ul> </li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Cooperate with the joint committee and others working to improve health and safety</li> <li><input type="checkbox"/> Not engage in horseplay or work while impaired</li> <li><input type="checkbox"/> Report injuries or disease immediately to your supervisor and follow your company's reporting procedure             <ul style="list-style-type: none"> <li>• Seek first aid, and</li> <li>• If necessary, seek further medical attention. Tell your doctor that your injury was work related.</li> </ul> </li> </ul> |
|--|--|

Employee Signature \_\_\_\_\_

Employer Signature \_\_\_\_\_

## New Employee/Coordinator Checklist (If additional information is required, please attach to form.)

### Emergency Procedures

#### First Aid:

- Know when to call first aid
- Demonstrated how to call for first aid
- Showed location of first aid room or kit
- Identified the first aid attendant(s)

#### Fire:

- How to respond to fire or smoke
- Evacuation procedures
- Location of fire exits and fire extinguishers

#### Chemical and Body Fluid Spills:

- Know when and how to alert help
- Demonstrated spill clean-up procedures and supplies

#### Other:

- Severe seasonal weather
- Natural disaster
- Power failure

### Workplace Hazards, Safety Policies, Procedures, & Practices

#### Overexertion from person and material handling

(leading to back, shoulder, or arm injuries):

- How to assess risk
- Use of equipment
- Safe handling techniques (including manual lifting restrictions)

#### Falls (slipping and tripping):

- High risk areas (hallways, bathrooms, parking lots, sidewalks, stairs)

**Working Alone:**  Buddy Check-in procedure

**Written Procedures:**  Written Safe Work Procedures

#### Exposures (including review of exposure control plan):

- Blood and body fluids (BBF)/infectious diseases (HIV/AIDS, HBV, HCV, TB, etc.)
  - Standard precautions, incl. protective equipment, hand-washing
  - Hepatitis B Vaccination
  - What to do if exposed to BBF (including getting to a hospital within 2 hours of being stuck by a needle)
- Pandemic Policy/Education and Training Booklet
- Chemical hazards (cytotoxins, anesthetics, latex, cleaners)
  - Safe practices to minimize exposure
  - Use of Personal Protective Equipment (PPE)
  - WHMIS symbols, labels, Material Safety Data Sheets
- Radiation
  - Sources
  - Protective measures and monitoring

**Violence** (the attempted or actual exercise by a person, other than an employee, of any physical force so as to cause injury to an employee, and includes any threatening statement or behaviour that gives an employee reasonable cause to believe that she or he is at risk of injury):

- Informed of history of violence by supported individual(s) or at site
- Procedures to minimize risk/respond to violent incidents
- Provided information on accessing critical incident stress debriefing

**This form must be returned to Employee Services immediately for filing in employee's personnel file.**

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*Relevant demonstrations should be given during the orientation when reviewing this section.*  
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\_\_\_\_\_  
\_\_\_\_\_

Employee Signature \_\_\_\_\_ Coordinator Signature \_\_\_\_\_ Date \_\_\_\_\_

#### Resources

- *Workers Compensation Act* Sections 115-124 (General Duties of Employers, Workers and Other)
- Occupational Health & Safety Regulation Sections 3.22-3.25 (Young or New Workers)
- Web sites: [www.ohsah.bc.ca](http://www.ohsah.bc.ca) or [WorkSafeBC.com](http://WorkSafeBC.com)